



SWALE REQUIREMENT ACKNOWLEDGEMENT HOMEOWNER/CONTRACTOR/SUBCONTRACTOR

Important: This acknowledgement shall be completed and signed prior to permit issuance.

Property Owner's Name(s):			
Property Owner's Address:			
City:		State:	Zip Code:
Contact: Email:			
Contractor / Sub Contractor: Company & Name:			
Address:			
City:		State:	Zip Code:
Contact: Email:			
THIS AGREEMENT made this date, Property Owner and Contractor/Subcontra			
(please print complete address of swale installment	t above)		·•
The swale installment is to be in accordance we Please refer to the City's website for Engineering https://www.fortlauderdale.gov/building_serveto be paid the sum of \$	ng Standard Details vices/Fax%20Permitt after successfu	 Under Drive ing/permits.h completion 	eway Plan Detail Sheets: httm . Contractor/Subcontractor is of the work, inspection from the
This acknowledgement is to protect both the related to work to be completed at the addres		ntractor fron	n a delay in closing out the permit
The Property owner and Contractor/Subcontra and complete swale installation for the above		•	rice quoted above includes correct
Owner Signature:		Date:	
Print Name:			
Contractor Signature:		Date: _	
Print Name:			